

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>CP</i>	<i>100001</i>	<i>9/11/00</i>
O.I.P.E. CLASSIFIER		<i>12</i>	<i>9/18/00</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		<i>10665</i>	<i>10-27</i>

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
8	✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet her

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